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ABSTRACT

The overall purpose of this study was to identify continuing education needs of family day care providers in Virginia. Specific objectives were to: (1) identify the most suitable method of provider training; (2) learn how providers usually obtain information about young children, what information they have found to be most valuable, and what they believe will help them most in the future; and (3) obtain providers' views on legislation that would require providers to receive annual training. A survey was mailed to the 270 licensed family day care providers in the state and an open-ended instrument was mailed to the presidents of 10 organized family day care associations in the state. Results of the surveys are summarized and a list of implications and recommendations is offered. (RH)

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Continuing Education for Family Child Care Providers: Seek Alternatives

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Introduction

In a time of dwindling human and financial resources, there are a variety of unmet needs in programs designed to train adults working with young children. Many of these programs have discovered practical ways to meet the needs of adults through on site training for child care center teachers and required training in some states for all providers. Generally when educators think of training, they envision a workshop setting.

To explore alternative ways of providing training for child care workers, particularly family day care providers, a study was conducted in Virginia. Licensed family child care providers and family day care association members were surveyed to determine their training needs.

Family Child Care

Child day care has become an important issue across the nation due to changes in American society centering on the entry of women into the work force. The traditional family with father working and mother at home now makes up fewer than 10% of all American families (U.S. Department of Labor, 1988).

Nearly 80% of children in the United States are in some form of family child care. Typically, family child care providers are

self-employed, depend on the regulations of the state, have no required qualifications to enter the profession, and are not those who parents seek individually. Ritter and Welch (1988) described family child care providers as an "unknown clientele unreachable through traditional programs and somewhat unmotivated to seek further education." (p. 5) Many caregivers respond negatively to training, saying training that since they have been parents and grandparents, training is unnecessary.

Caregivers often work in excess of 8 hours per day; therefore, they make it clear that weekends and evenings are reserved for their own families, household chores, and preparing for the next child care session. Consequently, training programs scheduled during these times are less likely to be attended. Barriers also include initial resistance to group meetings, need for transportation, child care relief and the perception that training is a private matter not requiring outside interference (Ritter & Welch, 1988; Kilmer, 1979).

Training in child development is a major component of the quality in child care environments. Literature in child care and education contains a recognition of the positive effects of formal teacher training and child-related job experience on teacher-child interactions. To be effective, caregivers should understand the needs and interests of children and provide an environment which enables the child to explore and learn through discovery.

Training Needs of Family Child Care Providers in Virginia

To determine the training needs of family day care providers

in Virginia, two sets of data were collected. It was hypothesized that since providers have so little time for themselves and their families, innovative training methods must be planned to deliver programs which will be beneficial and fit into their lifestyles.

Purpose

The overall purpose of the study was to determine continuing education needs of family day care providers. Specific objectives were:

1. To assess training needs of family day care providers relative to the most suitable method of training.

2. To determine how providers currently obtain information about young children, what has been most helpful to them in the past and what would be most helpful to them in future training programs.

3. To obtain input from providers relative to potential legislation requiring providers to receive annual training.

Procedure

In Virginia, family child care providers are subject to licensure if they care for more than five children. Presently, providers who care for five or fewer children are not required to be licensed. There are approximately 270 licensed family day care providers in Virginia, each of whom was sent a copy of a training needs survey. Unlicensed providers care for nearly 75% of the children in Virginia (House Document #3).

In addition to assessing the training needs of licensed providers, the researchers were interested in the needs of that larger body of unlicensed providers. Since a registration system

was not in place at the time of the survey, allowing no means of attaining names of these individuals, an attempt was made to collect information through the 10 organized family day care associations. An open-ended instrument was mailed to association presidents asking for small group input during an association meeting in December, 1990. The qualitative results of the association responses and the quantitative results from the mail survey are summarized.

Results

Twenty-six percent of licensed family day providers and 50% of the associations responded to the surveys. Forty-three percent were high school graduates and 26% college graduates. Fourteen percent had completed at least two years of college and 10% had not graduated from high school. Seventy-five percent (75%) of the respondents had experience with children as a result of being a parent and 66% also had experience working in group settings with children.

Past training in child care or child development varied; the majority (65%) had taken non-credit classes offered through community agencies and 15% indicated that they had never attended training programs in child care or child development. Providers responding through associations unanimously agreed that persons just entering the profession of family child care had different training needs from those who had been in it for some time. Respondents indicated that new providers need an understanding of the business aspects of the profession and of children's needs.

More experienced providers need updates on topics such as taxes, parent communication, solutions for problems, and information on networking.

Table 1 illustrates the types of child care training the respondents had attended.

Table 1. Training in child care or child development programs by licensed family child care providers in Virginia

Type of training	%
Non-credit classes	65%
Credit classes	46%
Other	28%
No training	14%
Child Dev. Assn. Training Cert.	15%
Graduate Courses	7%
Bachelor degree in child dev.	6%
Associate degree in child dev.	3%
Graduate degree in child dev.	2%

Does not add to 100% since respondents were allowed to select more than one response.

When asked how recently they had attended training, 85% responded that they had attended a training program within the past year two years. Responses to "How long ago was the last training you attended?" were crosstabulated with the method of training they had received. The results indicated that those who had been enrolled in training within the past two years had attended mainly college credit and non-credit community agency classes. Fifty percent of providers who said they had not attended training for five or more years had never received any training in child care or development.

In another crosstabulation, 17% had never received training and indicated that they do not have a personal need for any child care training. Eighty-two percent responded they want or need additional training in child care and development. Those who indicated they could not take part in child care training (67%) cited "no time to attend" as the primary reason.

Ninety-eight percent of the providers are caring for children in excess of eight hours a day; 21% indicated they provide regular weekend or evening care.

When asked to rank the three experiences which had best prepared them for their work with children, being a parent was the top ranked response (74%), attending conferences was the second highest ranking (46%) and supervised practical experience with children (42%) was the third highest ranked experience. Table 2 lists the additional reasons and rankings.

Table 2. Experience which best prepared family day care providers for their work

Experience	%
Parenting	74%
Attending conferences	46%
Supervised practical experience with children	42%
Reading/self-study	39%
Babysitting	35%
College classes	30%
Professional membership	23%
TV and videos	10%
Other	3%
Agency assistance	2%
High school courses	2%

Percentages exceed 100%. Respondents selected 3 experiences each

Respondents most often get information about child care and development from pamphlets distributed by community agencies (60%), magazines (49%), and books on child care (27%). Television and radio is used most frequently by 18% of the respondents and 16% cited other sources of information.

Providers responding through the associations indicated that primarily the information they received when they first started taking care of children came from personal experience, books, teenage babysitting and work in other child settings such as Sunday school, the church nursery and organizations such as scouts.

Providers who had been in the business for over four years indicated that they learn now from: 1) books and articles; 2) family day care association programs; 3) magazines and newsletters; 4) talking with other providers; and 5) the USDA Child Care Food Program.

When asked in what manner they most preferred to receive

information about child care and development, most respondents indicated videos for home viewing and one time workshops. Table 3 indicates all of the preferred methods of learning.

Providers responding through associations indicated they like to learn with videotapes and through small groups such as in their association meetings. One group also suggested a need for a home visitor who could come in and evaluate their work.

Table 3. Method in which family day care providers prefer to receive information on child care

Method	%
Video for home viewing	61%
One-time workshops	55%
College credit classes	39%
Non-credit classes	26%
Reading newsletters/articles	29%
Written self study units	29%
Home visitor training program	12%
Audio tape with manual	12%
Bookmobile loan service	12%
Telephone tapes/hotline	12%

Providers interested in a formal course or attending a workshop, indicated that the most convenient time to schedule attendance would be Saturday mornings (47%) or a weekday evening (34%). They also said they could invest as much as one semester per year for training (35%). Twenty-seven percent indicated they could invest a week, 18% said three or four days would be adequate and 11% responded with one to two days. Nine percent indicated they could invest 2-4 hours per years in training. One of the providers responding through the association

noted that half of a semester would be an appropriate amount of time.

Crosstabulation of the preferred method of learning with the amount of time providers are willing to invest in training reveals that methods of learning change with the amount of time providers are willing to invest (Table 4). Videos were the first choice in all cases except for those who would invest a semester in training when credit classes ranked as the top choice.

Table 4. Time investment crosstabulated with preferred method of learning for licensed family child care providers

Method	2-4 hrs	1-2 days	3-4 days	1 week	1 semester
Video	83%	65%	75%	54%	46%
Credit class	33%	43%	8%	28%	69%
Non-credit	--	43%	8%	29%	39%
Articles	33%	57%	58%	17%	8%
Workshops	33%	43%	66%	71%	49%
Self-study	49%	14%	17%	38%	30%
Audiotapes	33%	14%	16%	--	8%
In-home trng.	17%	--	8%	33%	17%
Bookmobile ser.	--	--	25%	--	17%
Phone tapes	17%	14%	8%	--	--

Does not tally 100% since providers were allowed to select three methods of learning. Methods with less than 8% not reported.

The topic which interested providers most frequently was discipline and behavior management. Topics freely suggested by providers in associations primarily included business management, stress management and discipline. Table 5 indicates other selections by mail respondents.

Table 5. Training topics most frequently selected by licensed family child care respondents

Topic	%
Discipline and behavior management	52%
Communication with parents	32%
Day care as a business	28%
Activities for children	28%
First aid and CPR	22%
Time and stress management	21%
Child development stages	15%
Licensure information	6%
Nutrition	2% *

* 82% of the respondents are enrolled in the USDA supplementary food program which requires nutrition training.

Respondents in associations were queried about critical skills that a family child care provider should possess. The most frequent response was "business management" and second was "first aid" and "CPR."

Seventy-five percent of the providers responding indicated they would pay for training. The amount per year they could invest ranged from $5.00 to $200.00. Table 6 outlines all responses.

Table 6. Amount licensed family day care providers are willing to pay per year for training

Amount	%
$50-100	33%
$26-50	23%
$100-200	19%
$11-25	12%
$5-10	6%
Over $200	6%

Providers responding through the associations were asked what kinds of rewards they were interested in receiving following training. All agreed certificates were "nice," particularly to display for parents to view and to upgrade the overall sense of provider professionalism. Some are interested in accumulating Continuing Education Units (CEUs), but prefer that they be accumulated and transferred eventually to college credits.

The final question posed to mail respondents regarded state legislated training requirements for family child care providers. Seventy-two percent felt as if it would raise the quality of family child care. Thirteen (13%) felt that mandated training would be an interference and imposition. Many providers commented on this questions with mixed responses which when tallied were interesting but indicated no particular trend. Association responses were positive overall in that mandated training could raise quality and professionalism, but skeptical regarding the enforcement of such a system. One person remarked "what would they hold out from you if you didn't attend annual training...your license?" Appendix A lists additional comments.

Providers from associations were asked what their most urgent need was at this time. Overwhelmingly the response was "respect, support and appreciation" from the community for the service they are providing to parents and children. One respondent said

> "I have managed 20 people in a computer center along with other jobs and this is the hardest job I have ever had."

Another respondent said that the father of a child she kept

expected curb service,

> "Some of the parents think we are their servants. I had to go out to the car to meet the father to even collect my pay...he wouldn't come in."

Additional urgent needs include insurance availability, a larger pool of providers to help them with referrals, and ways to communicate and "deal" with parents.

Providers in associations were asked to dream a little and state the kinds of services that would be nice for family child care providers. Some of the suggestions were 1) resource directory of agencies with their area of concern; 2) the availability of someone to call for support when problems arise; 3) training for some of the parents of the children for whom they care; and 4) start-up grants for family child care providers.

One association indicated a disappointment in recent food program training sessions, e.g. "they were impractical and redundant." Another group suggested that if training could include someone who could come to the house to observe and suggest..." not so much to come to us when we are on the defensive."

Implications/Recommendations

From this data, it appears, there is much work for continuing educators and child development professionals to do to plan training programs which are not only informative, but meet the scheduling needs and developmental needs of family child care providers. To further advance the thinking of planners, the following list of implications/recommendations is offered:

1. Although a majority of the providers have been enrolled in non-

credit courses in the past, the preference now appears to be video learning and credit classes.

2. If providers can experience a positive training program or be able to use information presented, there maybe a greater chance they will attend subsequent training programs.

3. Since time appears to be at a premium, methods of training should be considered which more easily can fit into provider schedules.

4. Since parenting is an experience most frequently cited as training ground for this profession, parenting seminars should reach a broader audience in the state.

5. Since providers are utilizing agency pamphlets and in many cases prefer to learn through reading brief articles, the newsletter format and short topical brochures with self teste could be developed for continuing education self study.

6. A plan to convert continuing education credit into college credit might be investigated.

7. Providers should be rewarded for their training accomplishments.

8. For the more experienced provider, training updates on topics such as taxes, parent communication, family child care as a business, and first aid.

9. Since providers are interested in as much as a week or a semester of training, ways to provide local child care relief should be investigated.

10. Since videos were the first choice for delivery of short term

training, the production of a video training series should be developed, particularly for the novice provider who needs information on business management and children's needs.

11. Since home visitation was noted in the association comments and appeared in the mail survey analysis, investigation of such a method of training should be conducted.

12. Since the most immediate need for providers is community respect, a planned campaign of public awareness about providers should occur in communities and with users of their services.

13. Since 82% of the respondents are enrolled in the Child Care Food Program, and nutrition was rated as a training need by only 2% of the respondents, it appears that nutritional training needs are being met by the child care food program.

14. Even with their minimal income, providers are willing to pay for training. A fee should not be out of the question when planning programs.

15. Further study of mandated training should be conducted.

16. Family child care start-up grants should be investigated.

17. Continuing educators, child care professionals, provider association representatives and agency leaders should cooperatively design a strategy to meet the training needs for this audience of caregivers.

Appendix A

Summary of comments about mandated training

Mandated training would:

- cause less people to become licensed (5)
- be an unnecessary taxpayer expense
- discourage some providers from staying in business
- encourage other providers to enter the field raising the image
- be needed but impossible to implement with the large numbers of unlicensed providers
- be okay if the licensing specialist determined if training should be required and is appropriate (2)
- serve as a support system for self-improvement
- Some felt that people with child development degrees should be exempt from annual training and training should be voluntary not mandatory.
- Two people indicated mandated training is long overdue and one suggestion was that parents should allow caregivers six paid days of leave per years to attend training.

References

Kilmer, S. (1979) Family day care training: A home-based model. Young Children. 34 (3), 12-19.

Ritter E. & Welch, D. (1988, Fall). Reaching and teaching: A study of audience targeting. Journal of Extension. 5-7.

U.S. Department of Labor (1988). Child care: A workforce issue. Report to the Secretary' s task force. Washington, D.C.

Virginia General Assembly (1990). Regulation and provision on child car care in Virginia. House Document # 3. Richmond.